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PTO/SB/05 (08-00) (modified)

Approved for use through 9/30/2001. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| <p align="center">NEW UTILITY PATENT APPLICATION TRANSMITTAL</p> <p align="center"><i>(only for new nonprovisional applications under 37 CFR 1.53(b))</i></p> | Attorney Docket Number | 22407-05491 |
| | First Named Inventor | Scott A. Rosenberg |
| | Title | Method And System For Pause Ads |
| | Express Mail Label No. | EL566204515US |

| APPENDIX ELEMENTS | ACCOMPANYING APPLICATION PARTS |
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| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages 26 <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Descriptive Title of the Invention <input checked="" type="checkbox"/> Cross Reference(s) to Related Case(s) <input checked="" type="checkbox"/> Statement Regarding Fed sponsored R & D <input checked="" type="checkbox"/> Background of the Invention <input checked="" type="checkbox"/> Brief Summary of the Invention <input checked="" type="checkbox"/> Brief Description of the Drawing(s) <input checked="" type="checkbox"/> Detailed Description <input checked="" type="checkbox"/> Claim or Claims <input checked="" type="checkbox"/> Abstract of the Disclosure </p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 10</p> <p>5. Oath or Declaration</p> <p style="padding-left: 20px;">a. <input checked="" type="checkbox"/> New Declaration Total Pages 3 <input type="checkbox"/> Executed (original or copy)</p> <p style="padding-left: 20px;">b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i></p> <p style="padding-left: 40px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>8. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>9. <input type="checkbox"/> Power of Attorney or Authorization of Agent</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input type="checkbox"/> Information Disclosure Statement & PTO-1449 <input type="checkbox"/> Copies of IDS Citation(s)</p> <p>13. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent</p> <p>14. <input checked="" type="checkbox"/> Return Postcard</p> <p>15. <input type="checkbox"/> _____</p> <p>16. <input type="checkbox"/> _____</p> <p>17. <input type="checkbox"/> _____</p> |
| <p>ADDRESS TO:</p> <p>Box Patent Application Commissioner for Patents Washington, D.C. 20231</p> | |


18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: /

Prior application information: Examiner: _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuing or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

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|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <input checked="checked" type="checkbox"/> <i>Customer Number and Bar Code Label</i> |  <div style="font-size: 2em; font-weight: bold;">00758</div> | |
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